PTO/SB/06 (08-03)
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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875										Application or Docket Number 9/858/63		
CLAIMS AS FILED – PART I (Column 1) (Column 2)							_	SMALL ENTITY		OR		R THAN . ENTITY
	FOR		NUMB	NUMBER FILED		NUMBER EXTRA		RATE	FEE		RATE	FEE
BASIC FEE (37 CFR 1.16(a))									s	OR		s
	TAL CLAIMS CFR 1.16(c))			minus 2	0 = .			x \$=		OR	x s_ =	
INDEPENDENT CLAIMS (37 CFR 1.16(b))			minus 3 =			•		x s=	<u> </u>	OR	x s =	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))								+s =		OR	+ s =	
* If the difference in column 1 is less than zero, enter *0" in column 2.								TOTAL		OR	TOTAL	
CLAIMS AS AMENDED – PART II												
	(Column 1) (Column 2) (Column 3)							SMALL	ENTITY	OR		R THAN ENTITY
AMENDMENT A		RE	CLAIMS MAINING AFTER ENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	1	40	Minus	<i>"30</i>	10		× \$ <u>25</u> =		OR	× \$ 50 =	500
	Independent (37 CFR 1.16(b))	•	4	Minus	<i>4</i>	=		x \$ 100=		OR	× s 200 =	
ΑN	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							+ s 180 =		OR	+ \$ 360=	
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	500
(Column 1) (Column 2) (Column 3)												
AMENDMENT B		REI A	LAIMS MAINING IFTER NDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	•		Minus	**	= .		× ۱ <u>علة</u> =		OR	× \$ <u>50</u> =	
	Independent (37 CFR 1.16(b))	•		Minus	***	=		× \$ 100 =		OR	× \$ <u>300</u> =	
Α	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							+ <u>\$ 180</u> =		OR	+ \$360 =	
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT C		REN A	LAIMS MAINING FTER NDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	•		Minus	**	=		x \$ <u>25 =</u>		OR	× \$ <u>50</u> =	
N N N	Independent (37 CFR 1.16(b))	•		Minus	***	=		× \$ <u>100</u> =		OR	× \$_&00=	
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							+ <u>s 180</u> =		OR	+ \$ <u>360</u> ±	
							_	TOTAL ADD'L FEE	·	OR	TOTAL ADD'L FEE	
 If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". 												

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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Barbara A. Saltsman

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Fee ONly

Applicant:

Michael Ehrhart

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AMENDMENT

Sir:

In response to the Notice of Allowability of August 12, 2005 please amend the above identified application as follows:

Amendments to the Specification begin on page 2 of this paper.

Amendments to the Claims are reflected in the listing of claims which being on page 4 of this paper.

Remarks/Arguments begin on page 11 of this paper.